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## APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\* None MA\*\* FOREIGN APPLICATIONS \*\*\*\*\* None MA

IF REQUIRED, FOREIGN FILING LICENSE GRANTED

\*\* 05/09/2001

Foreign Priority claimed <input type="checkbox"/> yes <input checked="" type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input checked="" type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature <u>MA</u> Initials	STATE OR COUNTRY IL	SHEETS DRAWING 4	TOTAL CLAIMS 31	INDEPENDENT CLAIMS 2
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## TITLE

Baseball base with identification

FILING FEE RECEIVED 642	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue ) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit
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